

**In This Issue:**

- [Home](#)
- [Director's  
CorNER](#)
- [ILL Advised](#)
- [Inside  
Outreach](#)
- [PubMed  
Particulars](#)
- [Tech Time](#)
- [Chic Chat](#)
- [Announcements](#)
- [Links](#)



## IN THIS ISSUE



- [Director's Corner](#)
- [Ill Advised](#)
- [Network Nuggets](#)
- [Docline Updates](#)
- [LinkOut Updates](#)
- [A Look To The Future](#)
- [Inside Outreach](#)
- [PubMed Particulars](#)
- [Tech Time](#)
- [Chic Chat](#)
- [Announcements](#)
- [NLM Technical Bulletin Hightlights](#)
- [Changing The Face Of Medicine](#)
- [ARCH Celebrates 3rd Anniversary](#)
- [Links](#)



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October-December  
Volume 3 - Issue 8

# NER'eastah

Newsletter of the New England Regional Medical Library

## In This Issue:

- [Home](#)
- [Director's  
CorNER](#)
- [ILL Advised](#)
- [Inside  
Outreach](#)
- [PubMed  
Particulars](#)
- [Tech Time](#)
- [Chic Chat](#)
- [Announcements](#)
- [Links](#)



## Director's Corner

As we enter a new year, it is customary to look back over what we have accomplished in 2003. Here at the [NER](#), we began the 3rd year of our 5 year contract. Javier Crespo became our Associate Director. Michelle Eberle was hired as the Consumer Health Coordinator. We had an extremely successful [NLM](#) site visit in June, which helped us to focus on our achievements and plan for the future. We've awarded a number of subcontracts and cost reimbursement awards designed to increase access to health information to health professionals and the citizens of the New England Region.

We exhibited at numerous state, local and national health professional meetings, consumer health fairs, and library association meetings. We hosted, planned and taught numerous classes on PubMed, Linkout, etc. 2003 was a very busy year for the NER Staff

On behalf of all of us at the NER, I wish everyone a Happy New Year! We look forward to working with you again in 2004!

**Elaine Martin, Director**

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CorNER](#)
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- [Inside  
Outreach](#)
- [PubMed  
Particulars](#)
- [Tech Time](#)
- [Chic Chat](#)
- [Announcements](#)
- [Links](#)



## ILL Advised



## NETWORK NUGGETS

A selection of "resource sharing" questions received by the NER office, prospected and reprinted for the benefit of regional members.

**Q1: Is it possible to set up DOCLINE 2.0 for automatic log in?**

R1: The automatic login feature (remembering the User Name and Password) is not provided by the DOCLINE System. Other third party products (such as QuickDOC) do support this feature. Customers with problems will need to contact the vendor directly for any front-end system they may be using to access DOCLINE. Third party vendors have worked in the DOCLINE 2.0 Test environment to make necessary changes to their code. In the case of QuickDOC (QDPortal), customers using this third party product will have to go to the QuickDOC web site and download the QDPortal 1.1.0 Installation file.

DOCLINE 2.0 does not have a time-out feature in the programming software.

**Q2: I've been told that NLM is getting away from library groups, that the new DOCLINE will allow libraries to update their Institution records so that requests can be directed to route (for example) only to FreeShare libraries -or - to those who list electronic document delivery as their preferred delivery method. Is this correct?**

R2: The focus of the DOCLINE 2.0 release was for improving the user interface and providing enhancements requested in the areas of updating, searching, and displaying Institution records. This major development was first announced at MLA 2002 and on DOCLINE-L in June, 2002. DOCLINE 2.0 screens were shown and major enhancements outlined at MLA 2003. NLM also made their MLA presentation available on the DOCLINE Information page. NLM apologizes for any confusion regarding the features scheduled to be included in the release.

DOCLINE has always provided routing by requested delivery method. NLM is aware of the customer's strong desire to enhance DOCLINE routing by allowing libraries to indicate more than one acceptable delivery method during Borrow and to route by library group. These and other requested enhancements to the Requests and Serial Holdings modules are being considered for a future major release.

NLM has no plans to eliminate support for library groups. However, NLM would not support creation of library groups based on delivery methods, since the software already provides this functionality.

**Q3: At the end of each Borrow session, we have to print out the NLM logo along with the LIBID, Institution Name and Library Name -- is this always on a separate page by itself? And, is there a setting that can be changed to have this print on the previous page, thereby conserving paper?**

R3: This issue was reported to NLM via "Contact DOCLINE" in the week of December 8. NLM plans to remove the DOCLINE footer from the Borrower copy of Receipts and on the Receipt viewed in Status/Cancel sometime in the next few weeks.

In the meantime, to maximize the printing area for receipts, refer to the FAQ on the NLM website: "How do I prevent Receipts from printing on two pages?"

[http://www.nlm.nih.gov/services/doc\\_print\\_receipt\\_page.html](http://www.nlm.nih.gov/services/doc_print_receipt_page.html)

**Q4: What happened to the option of "never route to NLM" choice in the delivery field? We have received a message from NLM about requests that have routed to them with a maximum cost less than the amount that they charge, but we have no way to prevent routing to them.**

R: Routing of requests to NLM is controlled by a new, separate setting in your Institution record. "Route to NLM" is in Borrowing Preferences, on the DOCLINE Options page.

1. Click on Institutions
2. Update
3. Click on DOCLINE Options in the sidebar navigation

Borrowing preferences are the default values that display on the Routing Instructions page while placing a request. You can change your default values during Borrow by modifying the value on the Routing Instructions page.

You can view screen shots of this and other new features linked from the DOCLINE 2.0 Release Notes, or view the Route to NLM settings directly at:

Borrowing Preferences: [http://www.nlm.nih.gov/docline/routetonlm\\_update.jpg](http://www.nlm.nih.gov/docline/routetonlm_update.jpg)

Borrow: [http://www.nlm.nih.gov/docline/routetonlm\\_routing.jpg](http://www.nlm.nih.gov/docline/routetonlm_routing.jpg)

For additional information, please refer to the FAQ on the NLM web site:

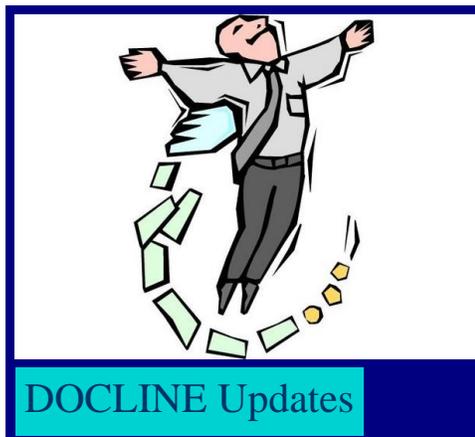
[http://www.nlm.nih.gov/services/doc\\_titlechange.html](http://www.nlm.nih.gov/services/doc_titlechange.html)



Please send your questions to Mark Goldstein at:  
[mark.goldstein@umassmed.edu](mailto:mark.goldstein@umassmed.edu) 508-856-5964

Who knows? -

It might be one of those "nuggets" of information everyone else's been prospectin' for!



On Saturday, December 6, 2003, DOCLINE 2.0 was released into production.

We're now calling on all DOCLINE participants to review and update the data that is stored in their DOCLINE record:

Address

1. Modify addresses to Title Case (that is, no UPPER CASE).
2. Remove references to ILL Dept from your Institution Address.
3. Add / modify Institution and Document Delivery phone numbers.
4. Modify your Billing Address (as needed) which was populated from your Document Delivery address.
5. Verify that URLs begin with "http://" and are correct.
6. Click "Save" button to update your record before moving to a new page.

People

1. Add new contact persons if you have more than one contact person for a role
2. Edit records that have two names listed to create separate records for each name
3. If a name is listed multiple times, then there was a difference in the records. For example: Mary Smith vs. Mary A. Smith. Select the preferred version of the contact record and edit it as needed, including checking off all of the contact types for that person. Delete the other forms of the contact record (Edit, Delete Person).

Membership

1. Verify information: Serial Holdings batch update authorization value, OCLC symbol.
2. Click "Save" button to update your record before moving to a new page.

Services & Fees

Review all fields, but especially new and changed fields:

1. Color copy service.
2. Base fees (Reciprocal Partner and Other ILL).
3. Library Group base fees are global and cannot be modified by an individual library.
4. Copy service to international libraries.
5. Modify existing surcharge, if any. Value should be the surcharge for the service - the fee charged, in addition to the base fee.
6. Add surcharges, as needed (Select surcharge type, click Add Surcharge, enter surcharge amount, and comment to explain service and/or fee).
7. Loan services and fees.
8. Loan service to international libraries.
9. Loansome Doc service to international users.
10. If you check Provides service to international users, select "All Countries" or click Add/Delete countries to select individual countries served).
11. Review / modify all comment fields.
12. Click "Save" button to update your record before moving to a new page.

DOCLINE Options

1. Verify Borrowing Preferences, Delivery Methods and Addresses.
2. Click "Save" button to update your record before moving to a new page, including

## Routing Table and M/A/N Map.

### DOCLINE Options

1. Remove closed libraries and non-DOCLINE libraries.
2. Add new libraries, as desired. (See Help for details on managing your Routing Table).
3. Click "Save" button to update your record before leaving your Routing Table.
4. Click "Request Approval" button once changes are complete to request RML approval.

### M/A/N Map

1. Remove closed libraries and non-DOCLINE libraries.
2. Add new libraries. (See Help for details on managing your M/A/N Map).
3. Click "Save" button to update your record before leaving the M/A/N Map.



## **"Upload Holdings" Feature Added to LinkOut**

A new LinkOut feature allows any library (even those that are not NLM SERHOLD participants) to display their print holdings information. Libraries that currently link to their print holdings by registering their SERHOLD information with LinkOut do not need to make changes.

With the "Upload Holdings" feature, libraries can connect PubMed users with their print holdings information, including: call number; location; and a dynamic catalog link. To participate, libraries need to:

1. Register for LinkOut;
2. Prepare a text file of their holdings; and
3. Upload the text file via LinkOut's "Library Submission Utility".

Libraries interested in this new Upload Holdings feature can find registration information and file specifications in LinkOut and Library Holdings:

<http://www.ncbi.nlm.nih.gov/entrez/linkout/doc/liblinkout.html#UploadHoldings>

Setting Up LinkOut for Libraries, a step-by-step tutorial, is also available:

<http://www.ncbi.nlm.nih.gov/entrez/linkout/doc/linktutorial.html>

NLM SERHOLD libraries can continue to use the LinkOut-SERHOLD interface to display DOCLINE Serial Holdings in LinkOut:

<http://www.ncbi.nlm.nih.gov/entrez/linkout/doc/liblinkout.html#LinkOutSERHOLD>

- Courtesy of NCBI



A  TO THE FUTURE



**■ Would you be interested in hosting a DOCLINE 2.0 Orientation Session or LINKOUT Presentation?**

Yes? -- Please contact:

Mark Goldstein at 508-856-5964 -or- [mark.goldstein@umassmed.edu](mailto:mark.goldstein@umassmed.edu).

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**In This Issue:**

- [Home](#)
- [Director's  
CorNER](#)
- [ILL Advised](#)
- [Inside  
Outreach](#)
- [PubMed  
Particulars](#)
- [Tech Time](#)
- [Chic Chat](#)
- [Announcements](#)
- [Links](#)

**INside OUTreach****OUTREACH**

At the NER, Outreach happens in many different ways.

The NER exhibits at national meetings and conferences. We exhibit at regional and local meetings, conferences, and events. Each time we do an exhibit, we are helping to inform people about the amazing array of information available from the National Library of Medicine and the services we in the NER are ready and willing to provide. Exhibiting is aimed at increasing awareness.

Outreach also happens through the work done by our Network Members. During this past year, there have been several projects ongoing in this Region, bringing access to health information to people. Whether this is done to help parents or patients learn to find reliable health information, to teach librarians how to more effectively answer their patron's health related questions, to improve health literacy, to increase access to health information in other languages, to improve the information-finding skills of health professionals, or to bring improved technology to libraries so that health information can be received in a more timely manner at the point of care, it is all Outreach - and Outreach that is happening all over the New England Region, thanks to our members.

Education and training is another facet of Outreach. Here in the NER, staff members provide free training on NLM resources and other topics to meet the needs of the Region. PubMed, MedlinePlus, TOXNET, Docline, LinkOUT, the NLM Gateway have all been taught in the Region. NER staffers have also been tapped to do more specialized projects, such as moderating a forum on scholarly publishing or providing information about contingency planning or doing a poster for NAHSL on PDA resources from NLM. Whatever the needs in the Region, the NER is there to help.

During this contract year and continuing, there are two specialized Outreach initiatives from the National Network of Libraries of Medicine (NN/LM): Outreach to Public Health and Outreach to Public Libraries. In both cases, it is the vision of the NN/LM to bring useful, appropriate

information tools to both public health workers and public libraries. Although their patrons and their specific information needs may differ, each of these groups serves society in important ways and both are often challenged economically. The information resources provided by the NLM are free and should be part of the tools available for these professionals to perform their functions. However, if they aren't aware that the resources exist, how can they use them? Hence, the need for these Outreach initiatives. As the NER looks for ways to make this vision a reality, we are not by any means forgetting the needs of all the other constituent groups in the Region - rather, we are broadening our Outreach efforts.

If you've got an itch for Outreach, we'd love to have you participate! If you're interested in subcontracts or awards, big projects or small, let us know. We are willing to assist you in assisting the Region.

And, as you make plans for the coming year, please remember that the NER is committed to Outreach. If we can assist you with a PubMed class or a Consumer Health class or a TOXNET overview or a CME session, please contact our office. We would be happy to assist you and, you have to admit, the price is right - there is no charge for our services!

**Donna Berryman, Outreach Coordinator**

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**In This Issue:**

- [Home](#)
- [Director's CorNER](#)
- [ILL Advised](#)
- [Inside Outreach](#)
- [PubMed Particulars](#)
- [Tech Time](#)
- [Chic Chat](#)
- [Announcements](#)
- [Links](#)



## Pubmed Particulars

### OLDMEDLINE Citations

Taken from the NLM *Technical Bulletin*

See for the entire article.

On September 30, 2003, over 1.5 million OLDMEDLINE citations were added to PubMed. These citations were originally printed in hardcopy indexes published from 1953 through 1965.

The data in the OLDMEDLINE records differ from that in the current PubMed records in several important ways:

- Abstracts: OLDMEDLINE citations have no abstracts.
- Publication Type: Only "Journal Article" was used.
- Language: Some citations will indicate "und" because the actual foreign language was not specified and is, therefore, undetermined.
- Article titles: Some are all in caps; over 28,000 citations show "Not Available" as the title because they lack English translations of the titles.
- Other Term: This field contains the original MeSH terms assigned at the time the records were first established. There are no data in the MeSH Heading [MH] field. As a result, the subject headings on OLDMEDLINE citations do not relate to current MeSH Tree numbers, and the MeSH "explode" capability that collects indented terms is not functional for these data. There are no check tags.

Considerations for PubMed searching of OLDMEDLINE citations:

New Status Tag: The **[PubMed - OLDMEDLINE for Pre1966]** tag identifies these citations.

New Subset: Searches can be limited to OLDMEDLINE using a new subset created for these citations. You may select, OLDMEDLINE for Pre1966, from the Subsets menu in Limits. Alternatively, this subset can be used directly in a search as **oldmedline [sb]**.

Other Term field: The Other Term field in PubMed contains non-MeSH subject terms. In the case of OLDMEDLINE citations, this field contains the original index terms. These terms are not updated. These terms are all preceded by an asterisk to indicate a major concept. (Asterisks are for display only. You cannot search Other Terms with a major concept tag.) The OT field is searchable with the Text Word [TW] and Other Term [OT] search tags.

Entrez Date: The Entrez date for OLDMEDLINE citations is created using the **date of publication** on the citation. This is necessary to prevent older citations from displaying near the top of retrieval as the default display order in PubMed is reverse chronological order of the Entrez date (i.e., last in - first out). This also means these citations will not be included in Cubby update retrieval.

Journal Title Abbreviations: Journal title abbreviations may have been changed from the abbreviation found on the original OLDMEDLINE citation; however, using an old abbreviation will retrieve across all years. NLM's catalog, LOCATORplus will have old title abbreviation data on serial records for OLDMEDLINE journals. As always, full title names can be used for searching in PubMed.

Personal Name as subject [PS]: Many OLDMEDLINE citations reference articles about historical figures. If you want to search for an atypical name, use the following examples as a guide:

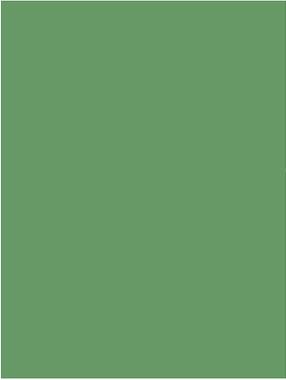
james i of england [ps]  
louis xiv [ps]  
st paul [ps]

More typical names can be searched as in this example:

von gudden b [ps]

Searching considerations (no abstracts, no MeSH):

- OLDMEDLINE citations do not have fields frequently found on MEDLINE records, including: Abstract, Affiliation, EC/RN Number and Name of Substances [RN], Grant Numbers [GR], and MeSH Terms [MH]. In addition to not having abstracts or MeSH terms, approximately two percent of OLDMEDLINE citations do not have a title. These factors reduce the number of access points for searchers.
- Also, keep in mind when searching that "limits" that utilize MeSH terms, e.g., age groups, human, etc., will exclude OLDMEDLINE citations. No MeSH also means no capability to explode broad terms to retrieve specific terms. When doing subject searches to include OLDMEDLINE citations consider including variations in vocabulary (e.g., kidney OR kidneys). NLM is investigating whether it will be possible to convert the old index terms to current MeSH vocabulary (as a long term project).



**Donna Berryman, Outreach Coordinator**

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- [Home](#)
- [Director's CorNER](#)
- [ILL Advised](#)
- [Inside Outreach](#)
- [PubMed Particulars](#)
- [Tech Time](#)
- [Chic Chat](#)
- [Announcements](#)
- [Links](#)

## TechTime



### Web Site Design – The Importance of Planning

Are you thinking about designing (or re-designing) a Web site for your library, but not sure where to start? This is the first in a series of articles about Web site design and deals with planning. A future article will deal with interface design, navigation, and usability issues. The guidelines outlined below can be scaled down to meet the specific needs of your Web development project, including staff size limitations.

Proper planning helps ensure the success of your Web project. Planning includes:

- [Forming a Web Site Development Team](#)
- [Identifying the Goals of the Site](#)
- [Obtaining Input on Content and User Expectations](#)
- [Evaluation](#)
- [Specifying User Requirements](#)

[Useful Links](#) lists some sites that can help you with the planning process. There is also information about other aspects of Web site design, such as design considerations (e.g. consistency, use of color, page layout, etc.), usability, navigation, and accessibility.

Regardless of the size of the project, it is important to obtain input from users on their needs (e.g. content, priorities, interface, etc.), and feedback on the library's existing site, if there is one. This does not need to be a formal process. You can meet one-on-one with certain key individuals or send an email requesting input. In addition, obtaining support from your Administration on the project, including the goals and objectives, may help get some extra funding for content!

#### Forming a Web Site Development Team

Even if you are going to perform all of the site development yourself, identifying a group of people willing and able to provide input and feedback is very important. Ideally, this should

include people from the various user groups the Web site serves—physicians, nurses, medical students, physical therapists, administration, patients, etc. Depending on the scope of your project, this group can either function as an informal resource, or meet formally throughout the development process. (Or, a combination of the two.)

One useful activity is for people to identify two or three of their favorite sites, and some of their least favorite sites, and explain what they like and dislike. This can either be done as a group or through individual meetings. This is a great way to get ideas for the user interface design. In addition, people may be more open about criticizing problems with a "third-party" site, rather than saying too many negative things about your current site. (And they may not even realize that is what they are doing!)

## Identifying the Goals of the Site

One of the first tasks is to establish the goals for the site. It is best to identify two or three high level goals and include quantitative measurements for success. For example, if your project is to update your library's Intranet site, you could establish goals such as:

- Increase by 50% the use of the library's Web resources by physicians, nurses, medical students, and other health professionals.
- Disseminate reliable and up-to-date information to the members of the XYZ Hospital Community through regular (at least weekly) updates to the content on the Intranet.

It may be necessary to do some work before finalizing your goals. For example, some of the issues you should address are:

- What is the purpose of the site—e.g. educate and inform rather than entertain and sell products?
- Who will use the Web site? (e.g. health professionals, consumers, senior citizens, students—high school, college, medical school, graduate school, etc.) This will have an impact on content, including how to organize the information.
- Is the site available to the public or part of an Intranet for staff use?
- What is the users' experience with the Web? Novice users, power users, or all levels?
- What information is currently available about current Web site usage, such as the number of visitors, which pages they are viewing, etc.

## Obtaining Input on Content and User Expectations

As part of planning, it may be helpful to develop several scenarios of people looking for information. Return to these scenarios throughout the Web site development process to verify that the site is meeting the needs of your users.

Examples of some scenarios include:

- Perform research on a disease, condition, or procedure—healthcare professional
- Learn about a disease or condition—either for personal use or for a family member
- Access the resources available through the library—e.g. print and online journals, online textbooks, clinical information systems, etc.

- Learn about resources through Internet links to other sites.

Another important area to focus your attention is with the actual content of the site. It may be helpful to perform a content inventory, listing existing and desired content. Don't forget to include costs with the inventory. It will help to have the cost information readily available when you need to start making those inevitable trade-offs.

It is important to obtain input and feedback from the user community on content requirements. Colleagues can also be an invaluable resource with ideas on how to get the most for your money.

## **Evaluation**

Remember those goals and objectives? Now you need to figure out how to measure success.

In a perfect world, it would be great to be able to perform extensive usability testing on a site before and after the design. However, that is not really practical, or necessary. As stated previously, it is advisable to obtain feedback from users on your current site, and have them provide input on updates during the re-design. But this can be done in a less formal way.

It is also important to obtain quantitative information on the use of your Web site. For example, if you established a goal of increasing the use of the library's Intranet site by 50%, you need to determine (or estimate) current usage, and then track usage after the re-design.

Check with your Information Services (IS) department to determine the type of statistics currently available for your site. Typical information includes the number of unique visitors, number of pages requested for viewing, the path visitors take through the site, the amount of time visitors spend on each page, and where visitors enter and leave your site. Most IS departments have site analysis reporting tools that present this information in a relatively easy to understand format.

## **Specifying User Requirements**

Specifying the user requirements can be the most difficult, and time-consuming part of the planning process. However, having a document to refer back to is critical in keeping the project on-track and meeting your goals and objectives. Sections of the specification should include the following information:

1. Organization's Background/Mission
2. Goals and Objectives of Site
3. Audience
4. Content
5. Budget
6. Schedule for Completion
7. Technical Aspects—e.g. hardware and software requirements
8. Site Marketing Plan
9. Evaluation—How to measure success
10. Ongoing Maintenance

This does not have to be a detailed document. Bullet points sometimes work better than long narrative sections.

## Conclusion

If one of your New Year's resolution is to update your library's Web site, hopefully this information will get you started in the right direction. Below are some links for additional reading.

## Useful Links

<http://usability.gov/>

National Cancer Institute.

<http://usability.gov/guidelines/index.html>

Research-Based Web Design & Usability Guidelines National Cancer Institute.

<http://www.upassoc.org/html/resources.html>

Usability Professionals Association Resources.

<http://useit.com/>

Useit.com: Jakob Nielson's Web Site.

<http://www.webpagethatsuck.com>

Web Pages that Suck: Learn Usability and Good Design by Looking at Bad Design.

<http://www.webstyleguide.com>

Web Style Guide (2nd Edition)

*Penny Glassman, Technology Coordinator*

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- [Inside  
Outreach](#)
- [PubMed  
Particulars](#)
- [Tech Time](#)
- [Chic Chat](#)
- [Announcements](#)
- [Links](#)



## CHIC CHAT

### MedlinePlus: New & Improved

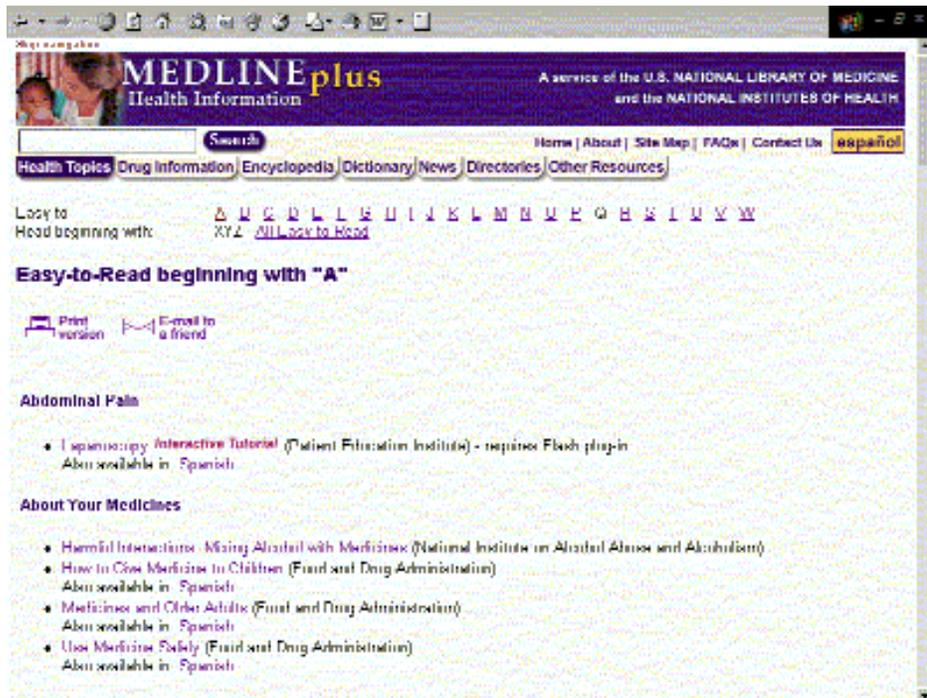
Check out the fantastic new features on MedlinePlus. New features include:

- a long awaited "easy-to-read" page in both English and Spanish
- Spanish drug information from Medmaster
- a Spanish language daily newsfeed
- weekly listservs on specific health topics
- and a revised organizations page.

The "easy-to-read" page is a collection of all of the web pages from the Health Topics plus the Interactive Tutorials which are considered "easy-to-read". Who decides what qualifies as "easy-to-read"? The qualification of "easy-to-read" is determined by the websites themselves, not MedlinePlus. The "easy-to-read" web resources are also labeled individually as such on the Health Topics pages.

#### Link to MedlinePlus: "Easy-to-Read" page

[http://nlm.nih.gov/medlineplus/easytoread/easytoread\\_a.html](http://nlm.nih.gov/medlineplus/easytoread/easytoread_a.html)

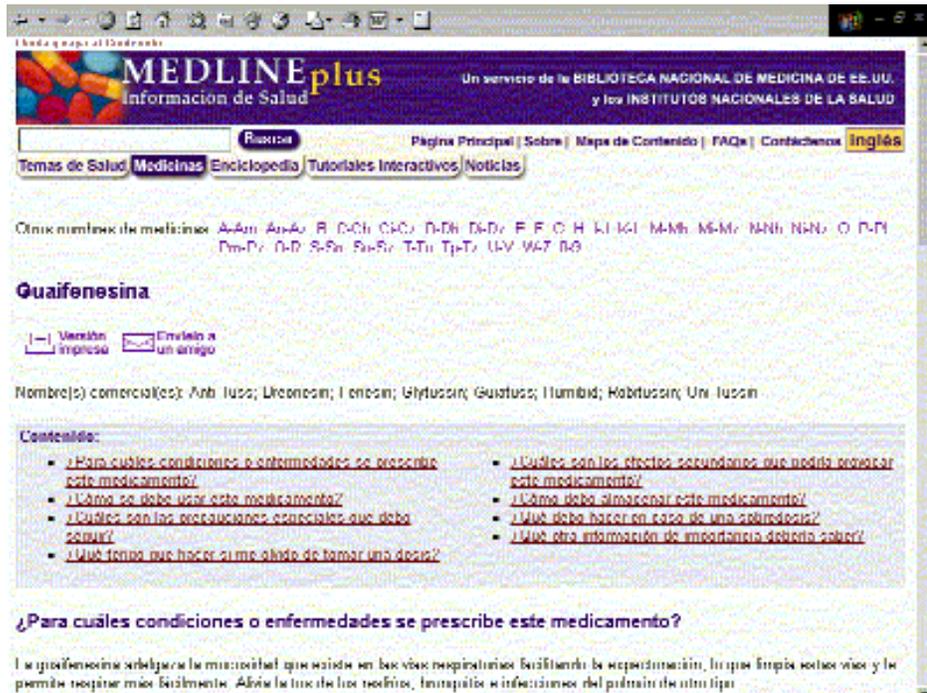


Another fantastic new feature to MedlinePlus is Spanish drug information by Medmaster. Note: all drugs do not have Spanish information available yet. Information is being added based on which drug topics are searched most frequently. To access the Spanish drug information, toggle to the page from the Espanol button. Here is an example of the Spanish drug page.

**Link to Spanish Drug Information page:**

**MedlinePlus: Medicinas**

<http://nlm.nih.gov/medlineplus/spanish/druginformation.html>

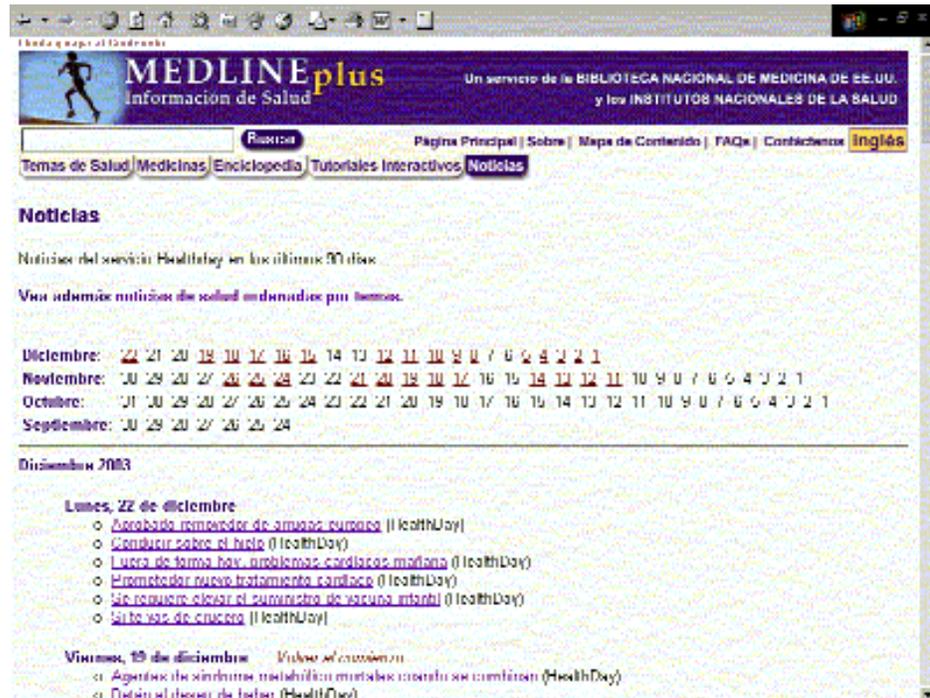


A daily Spanish language newsfeed provided by Healthday is another new feature of MEDLINEplus. To access the Spanish newsfeed either click on News and then Espanol or click

on Espanol and then Noticias.

**Link to MedlinePlus Spanish News:**

<http://www.nlm.nih.gov/medlineplus/spanish/newsbydate.html>



MedlinePlus is now providing several new current awareness services. New weekly listservs on specific health topics such as children, diabetes, mental health, seniors' health, and women's health are available. In addition, you may subscribe to MedlinePlus-NWS listserv which will send the daily newsfeed information from Healthday to your e-mail.

**Link: MedlinePlus: E-mail Announcement Lists (English)**

<http://www.nlm.nih.gov/cgi/medlineplus/listserv.pl?lang=EN>

**Link: MedlinePlus: E-mail Announcement List (Spanish)**

<http://www.nlm.nih.gov/medlineplus/spanish/listserv.html>



And last but not least...A revised organizations page, available from the "Other Resources" tab, now includes all organizations with pages with linked in MedlinePlus. The alphabetical pages include printer-friendly and email links.

**Link: MedlinePlus Organizations beginning with "A"**

[http://www.nlm.nih.gov/medlineplus/organizations/organizations\\_a.html](http://www.nlm.nih.gov/medlineplus/organizations/organizations_a.html)



**And that's not all...**

New features to be announced in the upcoming months include a new hospital directory and new "Go Local" state participants. A map link from listings of health resources will also be

added.

**Do you have questions on the new features in MedlinePlus?**

Feel free to contact Michelle Eberle, Consumer Health Information Coordinator, at [michelle.eberle@umassmed.edu](mailto:michelle.eberle@umassmed.edu) or 508-856-2435.

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**In This Issue:**

- [Home](#)
- [Director's  
CorNER](#)
- [ILL Advised](#)
- [Inside  
Outreach](#)
- [PubMed  
Particulars](#)
- [Tech Time](#)
- [Chic Chat](#)
- [Announcements](#)
- [Links](#)

**THE NEWS****NLM TECHNICAL BULLETIN HIGHLIGHTS**

The entire current issue of the NLM Technical Bulletin can be accessed online at [http://www.nlm.nih.gov/pubs/techbull/current\\_issue.html](http://www.nlm.nih.gov/pubs/techbull/current_issue.html). Here are some highlights:

**What's New for 2004 MeSH?**

[http://www.nlm.nih.gov/pubs/techbull/nd03/nd03\\_mesh.html](http://www.nlm.nih.gov/pubs/techbull/nd03/nd03_mesh.html)

In this article, you'll learn about the changes in MeSH for 2004, including:

- 666 descriptors were added representing topics with no directly corresponding descriptors in 2003 MeSH;
- 109 descriptors were replaced with more up-to-date terminology;
- 20 descriptors were deleted;
- 484 see references (entry terms) were added;
- the definition of the subheading "toxicity" was modified;
- and, other important information.

**MEDLINE Data Changes for 2004**

[http://www.nlm.nih.gov/pubs/techbull/nd03/nd03\\_med\\_data\\_changes.html](http://www.nlm.nih.gov/pubs/techbull/nd03/nd03_med_data_changes.html)

This article provides a good round-up of all the changes that took place during the recent end-of-year activities as well as some of the other changes that have taken place recently.

**Pharmacological Action Terms Identified in MeSH Database**

[http://www.nlm.nih.gov/pubs/techbull/nd03/nd03\\_pharm.html](http://www.nlm.nih.gov/pubs/techbull/nd03/nd03_pharm.html)

This feature gives PubMed users easy access to a listing of drugs and substances searched when a pharmacologic action term is searched in PubMed.

**Hazardous Substances Data Bank Chemicals Available via LinkOut**

[http://www.nlm.nih.gov/pubs/techbull/nd03/nd03\\_technote.html#chemicals](http://www.nlm.nih.gov/pubs/techbull/nd03/nd03_technote.html#chemicals)

LinkOut is more than just access to electronic and print holdings. It is also PubMed's access point for an incredible array of resources. Now users can, through LinkOut, directly access TOXNET's Hazardous Substances Data Bank chemicals. Read all about it here.

**UMLS Basics Classes**

[http://www.nlm.nih.gov/pubs/techbull/nd03/nd03\\_technote.html#umls\\_basics](http://www.nlm.nih.gov/pubs/techbull/nd03/nd03_technote.html#umls_basics)

Interested in learning more about UMLS? See this article for information about a free class to be held in February 2004.

Four New Features and Two New Collections in the Latest NLM Gateway Release  
[http://www.nlm.nih.gov/pubs/techbull/nd03/nd03\\_gateway.html](http://www.nlm.nih.gov/pubs/techbull/nd03/nd03_gateway.html)

NLM Training Program: 2004

[http://www.nlm.nih.gov/pubs/techbull/so03/so03\\_2004\\_training.html](http://www.nlm.nih.gov/pubs/techbull/so03/so03_2004_training.html) The schedule for the National Training Center and Clearinghouse (NTCC) has been announced. There will be classes in our Region in January in Worcester, in March in Boston, and in June in Orono, Maine.

*Submitted by, Donna Berryman, Outreach Coordinator*

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## Changing the Face of Medicine

“*Changing the Face of Medicine*” opened at the National Library of Medicine on October 14, 2003. This interactive exhibit honors the achievements of approximately 300 American women in medicine.

Those not able to make it to Bethesda to see the exhibit can still learn how women have influenced and enhanced the practice of medicine. A companion Web site <http://www.nlm.nih.gov/changingthefaceofmedicine/> lets people from around the world discover the fascinating history of America’s women physicians.

Sections of the Web site include:

### [Explore the Exhibit](#)

This is an online version of the exhibit. It includes an overview of the advancements made by women physicians from the 1800s to the present. Through the use of multi-media resources, and transcripts for those that cannot access these resources, the visitor to the site learns about the unique contributions numerous women have made to medicine.

### [Physicians](#)

The Physicians section includes a database search capability with access to more detailed information about the women physicians featured in the exhibition. It is possible to limit a search by location, ethnicity, specialties, and medical school. There is also Keyword search and a Browse by last name function.

### [Resources](#)

The Resources section includes information on Careers, Lesson Plans, and Suggested Readings. The Careers part provides students with recommended steps on how to join the medical

profession. The Lesson Plans are designed for a specific grade level (K-12) and includes information such as time needed to complete the lesson, vocabulary, learning outcomes, procedures, possible extension activities, teacher resources, and books for further reading. Suggested Readings includes reading material and videos, enabling students to further explore the topic of women in medicine.

## Activities

Activities is an interactive section with online learning resources about how the human body works and how women physicians have helped improve our quality of life.

## Share your Story

Users can provide information about how a specific woman physician has made an impact on their life. Themes include stories about memorable medical care provided by a woman physician, stories about a woman physician you admire, stores about a doctor in the family, or about the difference a woman physician has made in the community.

Take a few moments to peruse the Changing the Face of Women in Medicine exhibit. Notify others in your area, including teachers and public librarians, about this unique and informative resource available from the National Library of Medicine.

By Penny Glassman  
Technology Coordinator

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## **ARCH Celebrates 3rd Anniversary**

On December 5, 2003 ARCH celebrated its 3rd anniversary with a gathering of 50 guests from its target communities of Charlestown, Chelsea, Everett, and Revere. Supported by NNLM/NER, ARCH has reached more than 1,000 individuals including physicians, nurses, community workers, and patients over the past three years. The ARCH web site (<http://www.mgh.harvard.edu/library/arch/arch.asp>), designed and maintained by MGH Treadwell Library, helps people access accurate and reliable health information from pre-selected links such as MedlinePlus and Familydoc. At the celebration a patient from Revere shared her remarkable experience in using information from ARCH to form a local patient support group on the condition of Scleroderma. Representatives from Jack Satter House and CAPIC Head Start Program, both participants of ARCH, also spoke about their experience with the program. Mayor Thomas Ambrosino of Revere addressed the crowd and presented "Surfer's T-Shirts" at the end of the celebration ceremony to a group of six senior citizens who took ARCH training and have been helping their peers to surf the ARCH web site for health information.

**Submitted by Ming Sun, ARCH**



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October-December  
Volume 3 - Issue 8

# NER'eastah

Newsletter of the New England Regional Medical Library

**In This Issue:**

- [Home](#)
- [Director's  
CorNER](#)
- [ILL Advised](#)
- [Inside  
Outreach](#)
- [PubMed  
Particulars](#)
- [Tech Time](#)
- [Chic Chat](#)
- [Announcements](#)
- [Links](#)

## LINKS

[Funding Opportunities](#)

[What's New](#)

[A list of the online exhibits available from the HIstory of Medicine Division of the National Library of Medicine](#)

[Information on the Flu from the Center for Disease Control and Prevention \(Information for Consumers and Health Professionals\)](#)

[The Food and Drug Administration announces plans to prohibit sales of dietary supplements containing Ephedra](#)

[MedlinePlus Easy to Read](#)

[Changing Faces of Medicine- Celebrating America's Women Physicians](#)

[MLA Bulletin Archives now on the web](#)

[NLM](#) | [NN/LM](#) | [NER](#)

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